

## **Indianapolis CoC Plan for Serving Individuals and Families Experiencing Homelessness with Severe Service Needs**

### ***Vision:***

Drawing on evidence-based practices, community members agreed on the key vision and values that will guide the oversight and implementation of this Plan. Prioritizing the increase of safe, affordable housing as a clear focus for ending homelessness in Indianapolis will be the foundation for the Plan, yet service providers, government representatives, and businesses alike acknowledge that an increase in housing alone will not address the complexity of needs, barriers, and systemic challenges that individuals and families experiencing homelessness often face. Input from a variety of community partners and those experiencing homelessness first-hand confirms that providing access to holistic systems of care designed to address mental, physical, social, environmental, and economic needs is just as critical as increasing the availability of housing as we build effective solutions to homelessness. These clear, community-driven concepts shape the vision for the Indianapolis Community Plan to End Homelessness: “We believe everyone has the right to be housed and connected to care.” It is this same vision the CoC will use for the Plan for Serving Individuals and Families Experiencing Homelessness with Severe Service Needs.

### ***Participation Planning Process:***

Building on work already completed by the Indianapolis CoC, the City of Indianapolis, as the collaborative applicant, hosted nine (9) focus group sessions with community stakeholders. The City of Indianapolis hosted each of the sessions in a virtual form, at varying of times throughout a four-week window, including 1 session held in the evening (7pm). Participants were asked to self-select 2+ sessions to attend in alignment with their calendars and areas of expertise. The City invited 32 different stakeholders from different parts of the community and 24 attended at least one session. Two attendees were persons with lived experience, and they were compensated for their time per the Indianapolis CoC compensation matrix. Beyond the persons with lived experience, six (6) attendees were persons of color, and two (2) attendees were persons who identified as part of the LGBTQ+ community.

Each of the focus group sessions, hosted by City of Indianapolis staff, centered on two topics of discussion with stakeholders offering current strengths in the CoC system and opportunities for improvement. The City provided six different topics for discussion and stakeholders added another topic. Strategies in this plan incorporate the ideas from these discussions.

#### *Topic Discussions from Focus Groups*

1. Address homelessness as a public health response
2. Ensure fidelity to housing first
3. Utilizing the expertise of people with lived experience
4. Support people when closing encampments
5. Create more affordable housing options
6. Coordinate multiple levels of government and resources
7. Ongoing evaluation of the plan

Of those discussions, the following strategies were identified by the focus groups as high priority for the CoC:

1. Address Homelessness as a public health response
2. Create more affordable housing options
3. Coordinate multiple levels of government and resources

### ***CoC's Considerations and Priorities:***

The unsheltered homeless population is down 23.2% from the 2021 point in time count (PIT) to the 2022 PIT. This population represents 11.5% of the total homeless populations, and majority of the population is male. The total number of those chronically homeless in our community increased by 5.3% in 2022, while the amount of chronically homeless who were unsheltered increased by 17.2%.

This plan was written in response to the Supplemental Notice of Funding Opportunity (NOFO), but the priorities represent components of a strategy that are broadly applicable to a community's efforts to address unsheltered homelessness and meet the needs of people with severe service needs. The Indianapolis CoC has a number of plans that have been adopted by its governing board, the Blueprint Council, to address the needs of persons experiencing homelessness. The Indianapolis CoC incorporated strategies from those plans already initiated, including the 2018-2023 Comprehensive Plan to End Homelessness, the 2020-2024 Consolidated Plan, and the 2022 Indianapolis CoC Racial Assessment. These priorities reflect the most important components of the plan at this time and are woven throughout the sections of the plan.

The CoC released an application on July 29, 2022 and were accepted on August 26, 2022. The CoC prioritized applicants and projects that met the following priorities.

- Targeting people who are unsheltered, or with histories of unsheltered homelessness, and people with severe service needs.
- Creating assistance via PSH or RRH projects that address the needs of larger households.
- Leveraging additional housing resources or healthcare resources in the operation of the project.
- Describing how their project will implement Housing First principles and practices.
- Employing staff whose primary function is to assist individuals with their SSI/SSDI applications through the SSI/SSDI Outreach Assessment and Referral (SOAR) process.
- Describing how persons with lived experience of homelessness meaningfully contributed to the project design and development of the project and how they will participate in the implementation of project.
- Participating in the CoC landlord recruitment/engagement strategy through the CoC program Admission.

### ***Racial Equity***

In 2018, the CoC began assessing disparities in homelessness rates across different populations, particularly examining issues of racial equity. While the City has multiple populations of color, the Black Community represents the largest of those populations, both within Marion County and the homeless population. The CoC found White persons represented 30% of the homeless population, but 62% of the MC population. The CoC found Black persons represented 56% of the homeless population, but only 30% of the MC population. Other non-White households make up 6.3% of the homeless population. As such, the CoC has focused on the disproportionate results impacting the Black, homeless population. The CoC found Black households are more likely to experience sheltered homelessness (61.2% of the sheltered population) and White households are more likely to experience unsheltered homelessness (71.3% of the unsheltered populations). The CoC found that racial disparities are greatest in family homelessness, with 74% of homeless families identifying as Black.

The CoC developed its own Racial Equity Dashboard using HMIS data with a 12-month lookback on information. The tool evaluates disproportionality among race, poverty, sheltered and unsheltered

homeless populations. The tool is updated monthly as it plays an important role in the analysis of project and funding impact to improving the racial inequities of the Indianapolis homeless population. The Indianapolis CoC is cautious in funding any project that targets only an unsheltered population as it may only further racial inequity in our system. The Indy CoC is committed to working with the Governing Board, Racial Equity Workgroup, and persons with lived experience to balance the need to eliminate unsheltered homelessness while also maintaining an equitable system.

#### **4.A. Leveraging Housing Resources**

##### **Development of New Units and Creation of Housing Opportunities**

One goal of the Supplemental NOFO is to increase the number of permanent housing units available to persons experiencing homelessness. To do this effectively, funds requested must be leveraged with other housing resources. The primary leveraging of housing resources will be done by Applicants within their respective project applications.

The CoC structured the leveraging of housing resources within projects as a scored component of the local competition. Applicants that demonstrate written commitments from the Indianapolis Housing Agency (IHA) for at least 50% of the total units available to the project may be awarded full points on this scoring criterion. Commitments from other housing resources for at least 50% of the total units available to the project may be awarded partial points. Applicants that do not reach the 50% goal may receive partial points for this criterion. Commitment of units must be documented by a formal agreement.

The CoC also structured its annual competition through traditional CoC funding to leverage housing resources within projects as a scored component. Applicants that demonstrate written commitments from the Indianapolis Housing Agency for at least 25% of the total units available to the project may be awarded full points on this scoring criterion. Applicants that do not reach the 25% goal may receive partial points for this criterion. Commitment of units must be documented by a formal agreement.

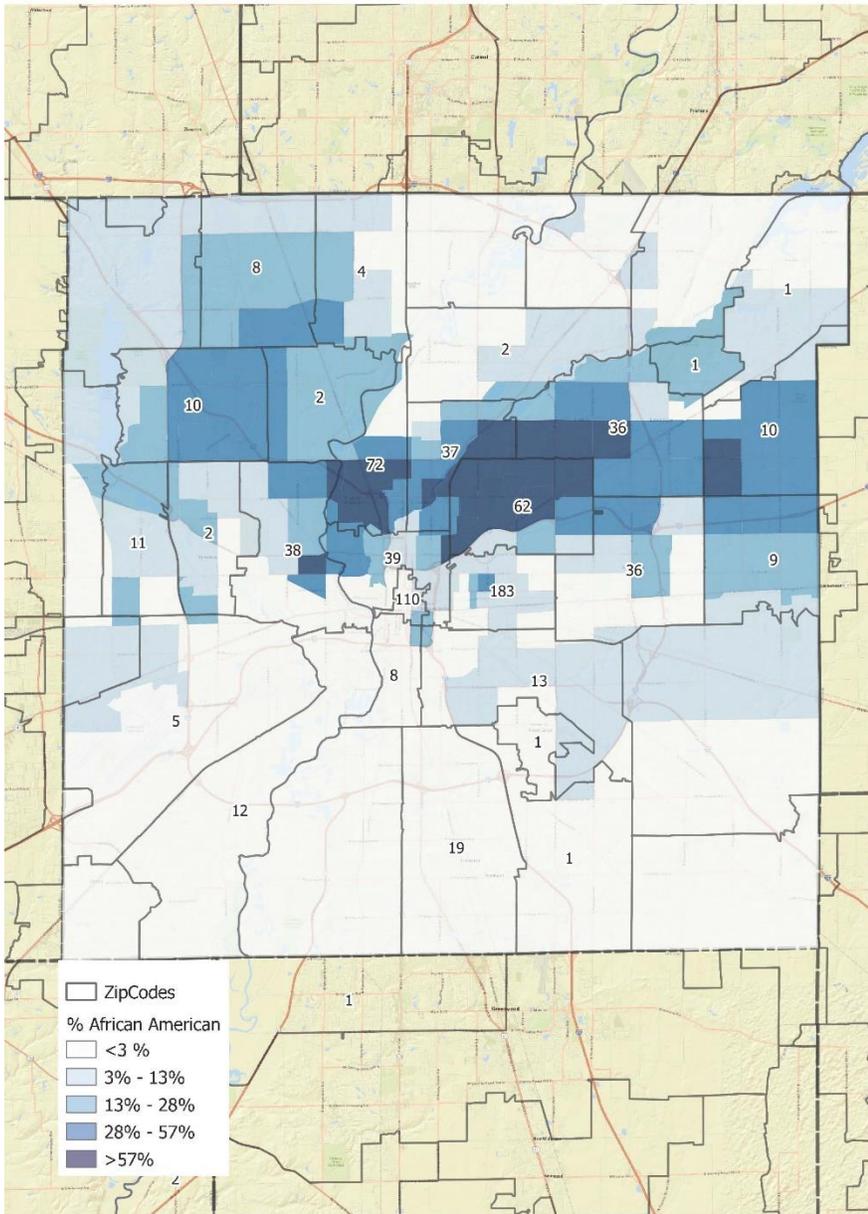
##### **Landlord Recruitment**

The CoC current strategy to increase landlord participation has been identified by the Indianapolis Focus Group participants as its strength.

The CoC is scaling permanent housing by developing a single housing inventory tool for landlords and tenants/providers to connect, called Padmission. Currently, 258 properties are registered and 109 units are currently (8/2/22) accepting applications. Padmission has 271 active users from CoC providers, aiding their clients in the search for permanent housing. Merchants Affordable Housing, the agency overseeing Padmission, has increased outreach to landlords to accept housing subsidies and/or housing choice vouchers. The CoC focused the Housing Acquisition Team's resources and the Flexible Funding to increase the pool of landlords and unit supply. The CoC is reducing barriers and improving participation by landlords that have included:

- Addressing barriers clients faced to voucher utilization
- Centralizing housing voucher navigation for Emergency Housing Vouchers
- Increasing landlord incentives
- Facilitating landlord meetings with IHA staff
- Creating a MOU for HomeNow Indy staff to conduct Housing Quality Standard inspections on behalf of IHA

Using a racial equity lens, the recruitment of landlords needs to include areas with smaller concentrations of Black households. The map below shows the current addresses of units available in RRH Units over the concentration of Indianapolis' Black population.



The CoC Comprehensive Plan to End Homelessness identified the following strategies to increase affordable housing in the area, to enhance landlord recruitment. The CoC is undergoing an evaluation of the progress made towards these goals and it will be available in first quarter 2023.

- Support affordable housing landlords to provide consistency in the quality of units and rental terms for formerly homeless individuals and families
- Create additional scattered site subsidies to increase client-choice housing options
- Build the capacity of permanent supportive housing providers to serve people with high barriers to housing through an assessment of current service models, staffing levels, and training needs

#### **4.B. Leveraging Healthcare Resources**

The CoC structured the leveraging of housing resources within projects as a scored component of the local competition. Applicants that demonstrate written commitments from a health care resource for at least 25% of the total service budget in the project may be awarded full points on this scoring criterion. Applicants that do not reach the 25% goal may receive partial points for this criterion. Commitment of units must be documented by a formal agreement. One project in the CoC priority listing for the 2022 special NOFO competition received full points and support for leveraging of health care resources.

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Attendees of the focus groups noted people at all levels of the Coc system tended to know about mental health OR housing, but not both. An area in which the CoC can improve includes more cross training for both sides of the front-line staff and agency leadership. Responding to this need, the CoC will increase training for CoC staff to better connect clients with important health care resources. The CoC offered free SOAR training for providers in spring 2022, emphasizing the importance of educating new front-line staff on the benefits of this training. While providers did not take advantage of this free training, the CoC will continue to offer the training free of charge to providers, reaching out to providers who are performing poorly in this area in quarterly performance monitoring. In 2023, the City will contractually obligate CoC and ESG funded providers to have at least one SOAR certified person on staff.

The Indianapolis Focus Group participants emphasized a need to see more collaboration with Indian Family and Social Services Administration (FSSA) including the Bureau of Development Disability Services (BDDS) program. The CoC will add this training to the regularly schedule of trainings each year.

The CoC Comprehensive Plan to End Homelessness identified the following strategies to increase affordable housing in the area, to enhance landlord recruitment.

- Provide funding and programing support to all service providers to integrate Housing First principles and rapid rehousing best practices into service delivery models so they can effectively address individuals' primary reasons for lack of permanent housing, promote social wellbeing, and assist individuals with obtaining cash and non-cash benefits
- Provide professional case management services to assist individuals with obtaining health care coverage and access to primary health care services, such as early diagnosis and treatment for chronic diseases

#### **4.C. Current Strategy to Identify, Shelter, and House Individuals and Families Experiencing Homelessness**

In 2021, the CoC served 2,141 households through its street outreach programs. Of those served, 30 percent were placed in permanent housing and 29 percent returned to homelessness. The CoC will utilize planning dollars to survey through the PIT count, the reasons for returns to homelessness. The

goal of the planning grant is to better understand why people return to homelessness in Indianapolis and how to address their needs before they return to homelessness.

### **Current Street Outreach Strategy**

The CoC, through the Home Now Initiative, is enhancing coordinated entry, funding system navigation projects, hiring 4 FTE positions to assist clients with acquiring the documents needed to file applications for non-employment income. System navigators will work with clients upon entry to CES until they move into a unit, with the program the client chooses. The system navigator is a partner to ensure the client understands all their choices, to assist with the gathering of documents, to access benefits that may be available to them prior to housing and to offer a soft hand off to the program. System Navigators will partner with Indiana Legal Services or other pro bono legal aid services to help clients access alimony and child support. The system navigators will serve as another access point for clients while they are waiting/preparing for housing.

Street outreach programs are focusing their efforts on person(s) with the longest length of homelessness. CES admission has been streamlined, with enhanced support from the system navigators to connect with clients to prepare them from housing. This support includes organization and securing documents needed for housing, finding additional resources while waiting for housing, and working in tandem with providers through the referral process. CES prioritizes households with the most chronicity and longest length of time of homelessness to be housed with open PSH or RRH units.

### ***Ensure that outreach teams are coordinated***

The Professional Blended Street Outreach (PBSO) team is a collaborative approach to ensuring that all persons experiencing unsheltered homelessness in Indianapolis are identified, engaged and offered services through the Continuum of Care. Full- and part-time professional outreach workers representing a variety of organizations comprise PBSO membership, and they work in teams of 2-3 workers engaging in street outreach according to a schedule agreed upon by all member agencies. Most teams consist of members from different agencies, allowing for a variety of experience and expertise among each team. Orientation to PBSO, signing of MOUs, etc. is managed by the Street Outreach Manager of a nonprofit service provider who also receives referrals and coordinates communication among PBSO teams, the Office of Public Health & Safety, the Indianapolis Metropolitan Police Department's Homeless Unit, and other support entities.

### ***Help people exit homelessness and unsheltered homelessness***

The intent of Street Outreach programs funded through this initiative is to identify the most vulnerable people, resolve the housing crisis for both the short term and the long term, and ensure that emergency lodging is not a substitute for permanent housing. Applicants for street outreach as a Supportive Services Only (SSO) project must clearly describe a strategy to connect participants to immediate crisis housing, including the use of CE to identify people experiencing unsheltered homelessness or people with severe service needs. Street outreach must prioritize those two groups

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Attendees at the focus group meetings noted that street outreach workers are doing hard work that requires a long period of engagement and persistence with many individuals, but they are doing so largely unsupported. Street outreach workers need training, opportunities for collaboration, to be listened to, and to be recognized for their expertise. All services for street outreach clients specifically need to be built to be accessible at the exact speed the client desires them – quick response when a client is ready to access a service, patience/grace for long periods of engagement if a client is hesitant. The CoC identified training topics for street outreach workers to engage persons with substance abuse orders (which is a large portion of the unsheltered population) and provide them with options for treatment and harm reduction.

***Ensure that outreach is frequent***

The CoC is divided into quadrants with teams specializing in serving a particular quadrant(s), visiting each section daily and creating familiarity with established encampments as well as with areas where new encampments may develop. Teams conduct street outreach six days per week during the day and three times per week during the evening.

***Engage PEH with the highest vulnerabilities and use culturally appropriate strategies***

The Indianapolis CoC's work in the area is strong. PBSO teams include members who speak Spanish and know ASL and are called as needed. Individuals speaking another language can be reached through the services of an independent translator, accompanying PBSO teams to the client's location.

***Use outreach teams to connect people to permanent housing***

In 2021, Coordinated Outreach staff leveraged partnerships to connect to 604 individuals, many of whom were not previously engaged. This resulted in 61 new CES assessments and 131 permanent housing placements. Outreach workers were also able to connect individuals directly to non-congregate shelters, which offered previously unsheltered individuals new opportunities to connect to housing and services.

The CoC is currently working to improve in this area, connecting persons in unsheltered and sheltered situations to permanent housing. The primary strategy is to enhance coordinated entry using housing navigators. The CoC will roll out the Home Now Indy initiative, to create a centralized housing navigation. Housing Navigation is a bridge from referral to permanent housing through our Coordinated Entry System (CES) to housing lease signing. The goal is reducing the length of time from referral to lease signing and having more referrals ending with successful housing placements. Navigators can assist at any point in this process by offering services to the housing case managers to help clients achieve housing placements. Currently, these tasks lie with either the housing program, CES assessor, or shelter/outreach workers. Considering the knowledge base needed for these activities, the Indy CoC found the need to streamline these efforts and create expert level positions called navigators. Any clients eligible for housing programs in CES are eligible for housing navigation services. These services are inclusive to individuals and families, those sleeping in shelters or unsheltered, and those homeless due to domestic violence.

***Hire people with lived expertise of unsheltered homelessness to conduct street outreach***

PBSO team members represent a wide variety of entities including homeless service providers, Community Mental Health Centers, the VA, and Marion County Probation. All outreach workers in the system work to locate clients and connect them with housing providers when the clients have been referred to housing.

The Indianapolis CoC has worked to improve the inclusion of persons with lived experience in all aspects of the CoC. The CoC partnered with CSH to train 2 cohorts of peer support specialists in the last year. There were 26 people in both cohorts, with 5 people being hired by local providers. The CoC will continue to support the training of peer support specialists to help with all aspects of front-line work, including work as part of the PBSO.

The CoC will also encourage providers to set goals for hiring persons with lived experience through the annual competitions scoring. The City of Indianapolis, as the Collaborative Applicant for CoC funding and the Participating Jurisdiction for Emergency Solutions Grant (ESG) includes questions and scoring on incorporation of persons with lived experience in the development and implementation of projects. This includes projects seeking funding for street outreach, and participation within the PBSO.

### **Current Strategy to Provide Immediate Access to Low-Barrier Shelter and Temporary Housing for Individuals and Families Experiencing Unsheltered Homelessness**

#### *Indianapolis Focus Group Strategy: Support people when closing encampments*

The Indianapolis Focus Groups identified the need for additional support for people when closing encampments, including transition periods for persons moving from unsheltered communities to other housing, including shelters. There is concern that clients entering housing from the streets are leaving behind their comfort zone (with other people all the time, know how to access what they need, with a case manager they trust from the street outreach team and switching to a space they are unfamiliar with, in which they are isolated and lack supplies, and required to switch to a new case manager they have had no previous contact with.

To improve shelter practices, lower barriers to shelter, and help shelters transition services to become more housing-focused to improve access and positive outcomes, the CoC has initiated practices to improve the housing first response. The first strategy is through the promotion and enforcement of housing first practices. The CoC written standards include housing first guidance for all programs. All programs are expected to ensure low barriers to program entry for program participants and there should be few to no programmatic prerequisites to permanent housing entry. As such, projects must allow entry to program participants regardless of their income, current or past substance use, criminal records, or history of domestic violence.

The Indianapolis Focus Groups discussed several barriers clients face when considering entering existing shelter options in Indianapolis:

- Clients can be hesitant to stay in a religious shelter, of which many in the area are funded or founded by faith-based groups.
- Clients who are trans or non-binary may experience discrimination in gender-based shelters, often coming from other residents than from staff.
- Clients may not be interested in the sobriety requirements by shelters not following housing first principles.
- Local shelters impose too many rules in shelters such as times they have to be in/out, or limitations to the number of days one can stay at the shelter. One local shelter that receives only private funding imposes a “10 day rule” that only allows folks to stay in their shelter for 10 days per month.
- While in shelter, persons have found limited access to mental and physical health care and educational opportunities.

The CoC will provides intensive technical assistance to emergency shelters through a cohort-based model to lower barriers and learn how to offer housing-focused services. Technical Assistance can teach shelters about the five key elements of effective emergency shelter, including immediate and low-barrier access. As part of the cohort curriculum, staff review program policies and procedures and hold 1:1 conversation to work through any identified barriers. The CoC has learned that while identifying barriers and getting agency buy-in to change policies and procedures is an important first step to increase access, they must work closely with shelter leadership to operationalize new policies and provide ongoing technical assistance to ensure all staff have the tools to work with more vulnerable populations. The cohort model has increased peer support and perspective; shelters contemplating change want to hear from their fellow shelters about their experiences making substantive changes to lower barriers.

### **Current Strategy to Provide Immediate Access to Low Barrier Permanent Housing for Individuals and Families Experiencing Unsheltered Homelessness**

The CoC's strategy for providing immediate access to low-barrier permanent housing has centered on aligning federal resources such as the CoC Program and the ESG Program with state-level resources and training like the Indiana Supportive Housing Institute. In Indiana, CSH works closely with the Indiana Housing and Community Development Authority (IHCDA) to stimulate and expand the creation of supportive housing for vulnerable populations of people who are experiencing homelessness. The Institute is entering its fifteenth cohort, helping supportive housing partners navigate the challenging process for developing affordable housing with supportive services. This includes learning how to implement housing first principles. The Institute delivers a pipeline of PSH projects ready to meet the needs of persons with severe service needs or experiencing unsheltered homelessness. Projects completing the institute receive priority for funding during the annual CoC Program NOFOs and the Supplemental NOFO.

The City of Indianapolis has also started a program with its Community Development Block Grant (CDBG) to help small landlords willing to work with CoC programs with needed repairs to meet habitability standards. Landlords wishing to accept assistance will be asked to register in Padmission, the CoC registry for landlords willing to work with CoC and ESG funded programs.

The CoC Comprehensive Plan to End Homelessness identified the following strategies in 2018 to increase low barrier, permanent housing options for persons who are unsheltered.

- Increase availability of recovery housing for previously homeless individuals transitioning out of treatment or the criminal justice system.
- Ensure availability of adequate safe housing options for survivors of domestic violence, sexual assault, and human trafficking.

The CoC is undergoing a third party evaluation of its progress towards these goals.

The Indianapolis Focus Groups identified the following gaps in the provision of permanent housing for persons with severe service needs or living in unsheltered situations.

- Funding services to support PSH clients. Services must be timely too, beginning right at move in. This helps with retaining landlords willing to take these clients.
- Supporting and creating affordable units w/ 3+ bedrooms for larger households
- Expanding the diversity in location as there is lack of affordable units on west side of town that follow housing first principles.
- Preserving affordable housing with its HOME dollars, in combination with creating units.
- Including other affordable housing developers in the Indiana Supportive Institute that seek other local and state subsidies, beyond CoC or ESG funding.

#### **4.D. Updating the CoC’s Strategy to Identify, Shelter, and Housing Individuals Experiencing Unsheltered Homelessness**

##### **Using Data and Performance**

Data is critical in understanding the experience of homelessness in our community. Collecting information regarding the needs and successes of persons experiencing homelessness in Indianapolis is essential to identifying and implementing strategies to ensure homelessness is rare, brief and nonrecurring. The Indianapolis CoC utilizes data from CES and HMIS in multiple ways, including evaluating performance of projects, determining strategies for funding new projects, priorities for strategic planning, and transparency to stakeholders and the public.

***Street Outreach:*** CES has 18 Access Points that provide flexible options to meet people where they are, including in-person assessments at homeless service agencies, at the person’s residence, or in their preferred location, virtual assessments via Zoom, or phone assessments. From 10/1/20-09/30/21, there were 6 virtual assessments completed and 1,125 via phone. There are also established referral pathways between McKinney Vento Liaisons, local police, diversion programs, hospitals, and re-entry services to connect people who may not be receiving homeless services elsewhere to CES Assessors (some of whom specialize in re-entry, youth and young adults, or DV). PBSO and Housing Focused Outreach are integrated with CES and provide outreach and CES assessments for unsheltered people who are unlikely to access other services. PBSO and Outreach Assessors completed 766 CES Enrollments from 10/1/20-9/30/21.

***Providing access to low-barrier shelter and temporary accommodations:*** The practices proposed for funding under this NOFO, which are also best practices, are:

- Providing access to low-barrier shelter and temporary accommodations will, from the beginning, focus on helping people to obtain permanent housing.
- Offering short term housing while waiting for Permanent Housing. Emergency lodging must add to the existing strategy and not fund or replace existing activities.
- Offer on-site addiction treatment for those in temporary housing
- Establish temporary shelters near encampments, smaller to offer privacy to residents

***Rapidly housing individuals with histories of unsheltered homelessness in permanent housing:***

The CoC utilizes the VI-SPDAT as on part of the CES assessment along with identifying vulnerabilities related to chronicity and homelessness, current risks to health and safety, daily functions, wellness and substance abuse history. The CoC is utilizing HUD TA to revamp the CES assessment tool to accurately identify and measure vulnerabilities, ultimately replace the VI-SPDAT with a more equitable tool and to refine prioritization policies to ensure those most in need of assistance are prioritized for housing assistance.

The Indianapolis CoC has recognized the need to address “camp closures” of its unsheltered populations. In January of 2021, the City passed ordinance 76, that allows for closing of camps due to “emergency situations.” The ordinance has defined emergency situations under three areas: 1) A camp being used by homeless persons has accumulated food waste, human waste, or other litter to a degree that the Marion County Public Health Department or other public health authority determines that the camp presents a public health hazard to the residents of the camp or the public that cannot adequately be redressed by less disruptive clean-up measures; 2) A camp being used by homeless persons has been established in an enclosed area, such as an underpass or tunnel, used by large numbers of pedestrians or motor vehicles, and public safety or law enforcement officials determine that the threat of concealed

explosives or other devices presents a threat to public safety; or 3) Other circumstances exist that present a significant threat to the public health or safety. Thus far, the City's Office of Public Health and Safety has not determined a safe way to host a sanctioned encampment in the community because of the potential for environmental and personal dangers, a lack of interest from a service provider in managing the area, and challenges in finding a spot for the camp. In addition, the CoC Governing Board voted not to allow for the prioritization of folks leaving encampments in CES, so it is challenging to offer housing options as required in the city ordinance. If the CoC were to prioritize individuals from encampments that are closing, it is feared that it could further racial inequity within the CoC system as most unsheltered persons in the 2021 PIT Count were White. Generally, this is an area of weakness in our community - there is not a lot of concrete help that can be offered to residents leaving an encampment that is being closed. One solution is the CoC to pilot a program that deploys a team with street outreach workers to assist folks living in public spaces to ensure they are set up with all the documents they need should they choose to pursue housing.

#### **4.E. Identify and Prioritize Households Experiencing or with Histories of Unsheltered Homelessness**

The Indianapolis CoC hosted an open competition in August of 2022 for projects that prioritized permanent supportive housing development. This competition was a dual competition, responding to both HUD's Annual CoC Competition and the Rural and Unsheltered Homelessness Special NOFO. The CoC, after evaluating PIT data, current programs funded with ESG and CoC funding, and the needs identified by persons with lived experience, prioritized this type of housing to address persons experiencing homelessness with the most severe service needs. Projects through the CoC will work with the CES system to offer housing to the most vulnerable candidates.

The launch of projects awarded under the unsheltered set-aside will start with a series of CoC meetings and in-depth trainings for provider around topics such as effective street outreach, Coordinated Entry, case conferencing, eligibility verifications, HUD compliance, policy and procedure workshops, and other technical assistance.

The CoC is utilizing HUD TA to revamp the CES assessment tool to accurately identify and measure vulnerabilities, ultimately replace the VI-SPDAT with a more equitable tool and to refine prioritization policies to ensure those most in need of assistance are prioritized for housing assistance. CES also remains flexible to prioritize populations when crises arise, such as encampment closures, housing programs losing their funding, emergency transfers, or people at high-risk of COVID. This enables persons in most need of assistance to receive permanent housing choices consistent with the CoC priorities.

The CoC Comprehensive Plan to End Homelessness identified the following strategies to identify and prioritize persons experiencing or with histories of unsheltered homelessness:

- Increase the number of low-barrier shelter options for unsheltered individuals and families, including LGBTQ individuals and those with substance use disorder.
- Develop and implement a clear strategy for Street Outreach to connect individuals and families directly to rapid rehousing and permanent housing options, including those living in camps.
- Align transitional housing with quality standards to reduce lengths of stay and increase exits to permanent supportive housing for populations for whom transitional housing is viable, including those experiencing domestic violence, those experiencing substance use disorder, Veterans, individuals with justice system involvement, and youth and young adults experiencing homelessness.

- Provide high-quality professional, intensive case management services in all temporary shelters and day services centers designed to directly connect individuals to all appropriate services, including permanent housing and obtaining healthcare and available cash and non-cash benefits.

The Indianapolis Focus Groups identified other strategies to connect persons with severe service needs and connect them to permanent housing solutions. This includes expanding transition housing options and services to reduce stress for clients entering housing from the streets. The group identified clients entering housing from the streets leave their comfort zone, with people familiar to them, ways to access the things they need and a case manager they trust and switching to unfamiliar places. This can increase isolations and the risk of returning to homelessness. Other ideas from the focus group included:

- Diversifying the geographic location of permanent housing and services across all of Marion County. Permanent housing options and services are located in portions of Indianapolis.
- Reducing barriers and access to healthcare. Long wait times, need for transportation, and need for phone access create common barriers for persons living within CoC funded projects.

#### **4.F. Involving Individuals with Lived Experience of Homelessness in Decision Making**

The Indianapolis CoC believes in creating a CoC that does not make decisions about persons with lived experience without involving persons with lived experience in the decision making. The first step of the process was to establish a lived experience, compensation matrix in the last fiscal year and secured \$30,000 in local funding to compensate persons with lived experience for serving in various parts of the CoC. Hourly rates range from \$15 for interns to \$60 for consulting on a particular project. As a result, persons with lived experience, regardless of their level of involvement, will be compensated for their time and expertise.

An example of utilize this guidance includes a strategy to improve the count of people who are unsheltered and living outside of the downtown area. Feedback the CoC received is that during the PIT, the CoC does not have the manpower or connections to count those in the county that are unsheltered and are not congregated in the downtown or near downtown areas. Because of this, there has been some discussion about how we can leverage communication and partnership with grassroot organizations that may know of more camps or unsheltered people not congregated in the downtown or near downtown areas.

Other Strategies the CoC has been through encouraging hiring practices:

- Increase widespread adoption of flexible qualifications on job listings, such as “lived experience in lieu of degrees;”
- Increase funding for peer support specialist positions and appropriate compensation for these positions;
- Engage persons with lived experience or currently experiencing homeless in more spaces, such as the Youth Action Board, the CoC annual competition workgroups, and the
- Need to develop a more robust community language/marketing around why we need the input of persons with lived experience and what it means to be a person with lived experience (market opportunities to people with lived experience)

Persons with lived experience in the Indy CoC provided vital feedback and were part of the focus groups as well as the Governing Board that decided on strategies and projects to submit for the Special NOFO. All members were offered \$50 per hour to sit on the focus groups and \$17 an hour for the other stages

and decision making meetings that they participated in. As the Special NOFO ends, these persons will join as permanent members of the Non-Conflicted Workgroup so that feedback and decision making of persons with lived experience is constant. The Non-Conflicted Workgroup oversees the annual CoC Notice of Funding Opportunity competition and the policies related to that competition. The goal, starting in 2023, is to add at least two new members to the Non-Conflicted Workgroup who have lived experience and get those individuals connected to other work in the community.

#### **4.G. Supporting Underserved Communities and Supporting Equitable Community Development**

***Identification of the Underserved Community:*** The CoC developed its own Racial Equity Dashboard using HMIS data with a 12-month lookback on information. The tool evaluates disproportionality among race, poverty, sheltered and unsheltered homeless populations. The tool is updated monthly. The dashboard provides insight into program entries, assessment scores, housing placements and returns to homelessness among several groups such as Black households, Latinx households, LGBTQ households, youth and youth adult households, veteran households, and households with mental health concerns or physical disabilities. The dashboard looks at CoC wide data and can also drill down into specific project types to examine disparities in more specific parts of the system.

***Description of the Underserved Population*** As stated earlier, while the City has multiple populations of color, the Black Community represents the largest of those populations, both within Marion County and the homeless population. As such, the CoC has focused its racial equity assessment on the disproportionate results impacting the Black, homeless population. The CoC found Black persons represented 56% of the homeless population, but only 30% of the MC population. The CoC found White persons represented 30% of the homeless population, but 62% of the MC population. The CoC found Black households are more likely to experience sheltered homelessness and White households are more likely to experience unsheltered homelessness. The CoC found that racial disparities are greatest in family homelessness, with 74% of homeless families identifying as Black. Also, Black households show up disproportionately in RRH programs because of lower VI-SPDAT scores. As a result, they have lower rates of permanent housing placement and higher rates of returns to homelessness.

The LGBTQ+ is another population that is at higher risk for experiencing homelessness in Indiana and an underserved population. Nationally, 48% of LGBTQ youth out to their parents say that their families make them feel bad for being LGBTQ (Human Rights Campaign – HRC). In addition, trans youth are more than twice as likely to be taunted or mocked by family for their trans or non-binary identity than cisgender LGBTQ youth (HRC). 75-85% of LGBTQ youth without a place to stay have been forced out by their parents or are fleeing rejection or mistreatment at home (True Colors). LGBTQ youth and young adults are 120% more likely to experience homelessness than their heterosexual and cisgender peers (True Colors). In Indianapolis, every night, an estimated 72 youth who identify as lesbian, gay, bisexual, transgender, or questioning (LGBTQ) are homeless right here in our city. 68% (49/72) of these youth say that family rejection of their sexual orientation or gender identity is a major cause of their homelessness.

The Damien Center, as part of the LGBTQ+ Community Needs 2020<sup>1</sup>, surveyed 682 persons who identified themselves as LGBTQ+. Most respondents were between the ages of 25 and 44, and 86% of them identified as White. While 89% of respondents have their own housing, 17% had experienced homelessness in the past.

***Strategies to serve the Underserved Population*** The CoC has updated its most recent racial equity assessment in August of 2018. The Racial Equity Committee of the CoC Governing Board has been tasked with setting strategies and benchmarks for measuring progress to improve outcomes for homeless populations who identify as Black or African American. The CoC is working with Power Analysis, to meet with this group monthly. The target is to have goals and benchmarks by the end of calendar year 2022. Strategies the CoC has already undertaken include:

- Update the CES Assessment to reduce the impact of lower scores often given to persons of color, by including vulnerabilities. The outcomes for vulnerability fall in six categories: 1) vulnerable to death or suicide; 2) vulnerable to experience abuse, exploitation, or victimization, or to being taken advantage of; 3) vulnerable to significant negative health outcomes; 4) vulnerable to criminal justice system involvement; 5) vulnerable to continued homelessness; and 6) vulnerable to unwanted family separation. These six outcomes are prioritized based on population age and household size, to reduce the impact of racial inequity in the system from the first point of contact, the CES assessment.
- Questions in the CoC renewal evaluations, new project application, and ESG application that ask about organizational, internal values when it comes to racial equity. These answers are tracked and compared to the Racial Equity Dashboard to evaluate whether the new projects have had an impact in eliminating disparities in outcomes.
- Provide annual cultural competency training for leadership and direct service staff including content on underlying, systemic issues contributing to racial disparity in housing as well as strategies for reducing such disparities.
- Encourage the hiring of more black individuals for front line staff and leadership positions within the CoC. Feedback from persons with lived experience is the request to have more assessors “look like them,” so they may feel comfortable that the person working with them understands their perspective and challenges.
- Conduct annual CoC-wide training with providers on how to effectively implement the Equal Access to Housing in HUD Programs Regardless of Sexual Orientation or Gender Identity (Equal Access Final Rule).

### **Evaluation of the Plan**

The Indianapolis CoC recognizes the value of not only planning and strategizing, but the evaluation of those plans. Prior to the COVID-19 Pandemic, the 2018-2023 Comprehensive Plan to End Homelessness, underwent a quarterly evaluation report to the entire CoC through quarterly convening meetings. The lead agency, the Coalition for Homelessness Intervention and Prevention, and the City of Indianapolis, reported to the community the progress made. The COVID-19 pandemic changed the affordable housing and homelessness provision landscape dramatically. In order to fully understand the pandemic’s impact on the challenges, the CoC has hired a third party to evaluate its progress towards the initiatives of the 2018 plan. The CoC expects to receive the results in early 2023 and share with the

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<sup>1</sup>LGBTQ+ Community Needs 2020, by the Damien Center, <https://damien.org/assets/file-assets/LGBTQ-Community-Survey-Report.pdf>

general public the results prior to the 2023 annual CoC competition. The evaluation includes the CoC Governing Board, housing and service providers, and community stakeholders.

The Indianapolis Focus Groups suggested that the evaluation of this plan be: specific, clearly communicated, transparent, nuanced, inclusive of front-line staff & persons with lived experience, and reflective of individual successes & system level data. The evaluation should include success as well as recognize areas of improvement. The evaluation should also include easily read graphics and results that can be publicly shared no less than every six (6) months. The quarterly CoC Convening meetings is another medium to share the progress, however, there should be another way to share the results with the community the CoC serves, persons with lived experience or a way to make the CoC Convening meetings more accessible to persons with lived experience.

The Indianapolis Focus Groups also recognized people experiencing the system now do give feedback but may not be done so constructively or in a way that benefits program. There is a desire to make sure feedback from program recipients, including negative feedback, be incorporated into all levels of service, including program development, CoC-wide system modeling, strategic planning and evaluations, and advocacy. Some clients may have barriers to participation in some of the traditional methods for feedback and CoC participation, such as mental health, physical health or other need in which accommodations may be needed. Some of the suggested accommodations include group therapy, or peer lead workgroups.

**Next Steps:** The Indianapolis Focus Groups categorized the work of the unsheltered plan in six key strategies.

1. Create more affordable housing options
2. Utilizing the expertise of people with lived experience
3. Coordinate multiple levels of government and resources
4. Support people when closing encampments
5. Ensure fidelity to Housing First
6. Address homelessness as a public health response

The Persons with Lived Experience Workgroup will begin prioritizing the key strategies and develop measures for each of the strategies. Developing measures will help the CoC over the next three years evaluates its progress and seek additional funding from non-federal government and private resources. With only two projects identified in the special competition, other resources will be needed to fully implement the strategies listed.

Once this plan is approved by the CoC Board, the next steps are to incorporate it into the City's 2023 Action Plan. The Action Plans are developed by City staff with input from CoC general members. Implementation of this plan will begin with the Notice of Conditional Award by HUD, and projects awarded under this NOFO should plan to start operations in 2023.